



VILLAGE OF SAVOY
APPLICATION FOR RAFFLE LICENSE

Organization Name: _____

Address: _____

Type of Organization: _____

If organization is incorporated, what is the date of incorporation?

Date: _____ State: _____

List the organization's presiding officer, secretary, raffle manager, and any other members responsible for the conduct and operation of the raffle.

PRESIDENT: _____ Birth Date: _____

Address: _____

Phone No.: _____

SECRETARY: _____ Birth Date: _____

Address: _____

Phone No.: _____

RAFFLE MANAGER: _____ Birth Date: _____

Address: _____

Phone No.: _____

List any other members responsible for the conduct and operation of the raffle on the back of this page.
List name, date of birth, address, and phone number.

_____ This request is for a single raffle license

_____ This request is for a multiple raffle license.

The aggregate retail value of all prizes to be awarded: \$ _____

Maximum retail value of each prize to be awarded in the raffle: \$ _____

The maximum price charged for each raffle chance issued: \$ _____

The area or areas in which raffle chances will be sold or issued: _____

_____ Time period during which raffle chances will be determined: _____

_____ The date, time and location at which winning chances will be determined:

Date: _____ Time: _____

Location: _____

If multiple raffle license, list on a separate sheet, the date, time, and location for each raffle to be held within the one(1) year period of time from the date of the issuance of the license.

**THE APPLICATION FEES ARE NONREFUNDABLE EVEN SHOULD THE APPLICATION
BE REJECTED BY THE VILLAGE BOARD OF TRUSTEES**

APPLICATION FOR RAFFLE LICENSE

SWORN STATEMENT

The following officers attest to the not-for-profit character of the applicant organization:

(NAME OF ORGANIZATION)

Dated this _____ day of _____, _____

PRESIDING OFFICER

SECRETARY

STATE OF ILLINOIS)
) ss.
COUNTY OF CHAMPAIGN)

Signed and sworn to before me this _____ day of _____, _____.

PRESIDING OFFICER

SECRETARY

NOTARY PUBLIC

Notary Public Seal: